

State of Michigan
Department of Labor & Economic Growth
Office of Policy & Legislative Affairs
State Boundary Commission

**GENERAL INSTRUCTIONS FOR THE PREPARATION OF AN
ANNEXATION PETITION BY COUNCIL RESOLUTION
TO BE FILED WITH THE STATE BOUNDARY COMMISSION**

AN ANNEXATION PETITION BY COUNCIL RESOLUTION IS COMPOSED OF THE FOLLOWING PARTS AND FORMS:

- PART I.....** A map or drawing for the area proposed to be annexed, prepared by the petitioner in such a way that the minimum map size is 8 ½" by 13", with a maximum map size of 14" by 18". The map or drawing is supplied by the petitioner. Label this map PART I. Review State Boundary Commission Administrative Rules No. 25 and 27 regarding the content of this map.
- PART II.....**
- PART II(a).....**
- PART III.....** Refer to State Boundary Commission Administrative Rules No. 25 and 27 regarding the content of this description.
- PART IV.....** Petition Form No. 2010-2002 – Obtained from the State Boundary Commission or the Secretary of State (size 8 ½ x 14).
- PART IVa.....**
- PART V.....**
- PART VI.....** A map prepared on paper supplied by petitioner, showing the relationship of the area proposed for annexation to the balance of the involved and adjacent units of government. The map may be of a size the petitioner chooses and shall not be evaluated by the Commission in its determination of legal sufficiency. Label this map PART VI.

<p style="text-align: center;">This petition form is issued under authority of Public Act 191 of 1968, as amended. Completion of this form is voluntary, but failure to do so may result in a denial of your application.</p>

The completed petition should be filed with the Boundary Commission office in Lansing. This may be done in person between the hours of 8:00 a.m. and 5:00 p.m., or by mail at the following address.

State Boundary Commission
Office of Policy & Legislative Affairs
Michigan Department of Labor & Economic growth
611 W. Ottawa Street
P.O. Box 30004
Lansing, MI 48909

<p>In compliance with the American Disabilities Act, the Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need assistance with reading, writing, hearing, etc., you may make your needs known to this agency.</p>

ANNEXATION BY COUNCIL RESOLUTION

PART II

To the State Boundary Commission:

We, the duly elected legislative body of the City of _____,
having passed a resolution (in PART V) asking for the annexation of the territory described herein (in
PART III), do petition that the described territory in _____ township(s),
_____ county(s), be considered by your commission for
annexation, in accordance with the provisions of Act 279 of the Public Acts of 1909, as amended,
and the provisions of Act 191 of the Public Acts of 1968, as amended.

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PART IIa

As petitioner, it is your responsibility to furnish the State Boundary Commission the names, addresses and telephone numbers of persons and governmental bodies that will be noticed for Commission meetings and hearings. The importance of accurate and most current information cannot be overemphasized. Processing of this petition may be delayed if inaccuracies cause improper notice.

1.

Name of City:
Name of City Clerk:
Mailing Address:
Telephone Number: () Fax: ()

2.

Name of Township:
Name of Township Clerk:
Mailing Address:
Telephone Number: () Fax: ()

3.

Name of County:
Name of County Clerk:
Mailing Address:
Telephone Number: () Fax: ()

4. If the petition should involve more than one township, county and/or village, place additional township, county and/or village information on separate sheet and attach to this form.

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PART III

The territory proposed for annexation to the City of _____ is described as follows:

ANNEXATION BY COUNCIL RESOLUTION

PART IV

This legislative body of the city of _____ adopted the following resolution:

ANNEXATION BY COUNCIL RESOLUTION

PART IVa

CERTIFICATION

The foregoing is certified and true copy of a resolution passed by the legislative body of the City of _____ on _____, 20____ by a vote of _____ to _____.

City Clerk or Deputy City Clerk (signature)

City Clerk or Deputy Clerk (print)

Subscribed and sworn before me

this _____ day of _____, 20_____.

Notary Public, _____ County, MI.

My Commission Expires:_____

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PART V

We further represent that the annexation proposed in this petition is necessary or desirable at this time for the following reason(s):